

Arizona Department of Health Services

Division of Behavioral Health Services

PROVIDER MANUAL

Section 8.1 **Encounter Validation Studies**

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8.1.1 **Introduction**

The Center for Medicare and Medicaid Services (CMS) requires the Arizona Health Care Cost Containment System (AHCCCS) to conduct encounter validation studies as a condition for receiving Federal Medicaid funding. ADHS/DBHS may also periodically conduct encounter validation studies for Non-Title XIX/XXI populations. An encounter is a record of a behavioral health service rendered by a provider to a behavioral health recipient.

The purpose of encounter validation studies is to compare recorded utilization information from a clinical record or other source with submitted encounter data. The review “validates” or confirms that covered services are encountered timely, correctly and completely.

The purpose of this section is to:

- Inform behavioral health providers that annual encounter validation studies may be performed by AHCCCS or AHCCCS contracted staff; and
- Convey ADHS/DBHS expectation that behavioral health providers cooperate fully with any encounter validation review that AHCCCS or ADHS/DBHS may conduct.

8.1.2 **References**

The following citations can serve as additional resources for this content area:

[AHCCCS/ADHS Contract](#)
[ADHS/T/RBHA Contract](#)
[Behavioral Health Medical Record Standards Section](#)
[Submitting Claims and Encounters Section](#)
[Covered Behavioral Health Services Section](#)
[ADHS/DBHS Behavioral Health Covered Services Guide](#)

8.1.3 **Scope**

To whom does this apply?

All behavioral health providers that deliver covered behavioral health services to eligible persons.

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8.1.4 Did you know...?

- During the annual encounter validation study, AHCCCS conducts two encounter validation studies. One study examines non-institutional services (HCFA 1500/837P encounters) and one study examines institutional services (UB-92/837I encounters).
- The majority of correctness errors cited are caused by not coding the diagnosis to the correct level of specificity. Coding from the ICD-9 rather than the DSM-IV will prevent most of these error types.
- If determined appropriate, ADHS and the RBHAs can pass down sanctions for non-compliance with encounter submission requirements to behavioral health providers.

8.1.5 Objectives

To communicate an overview of data validation studies and the expectation for behavioral health providers to cooperate with all activities associated with AHCCCS' or ADHS'/DBHS annual data validation review.

Procedures

8.1.6-A. Criteria used in encounter validation studies

AHCCCS utilizes certain criteria as part of the annual encounter validation study. The criteria may include timeliness, correctness and omission of encounters. These criteria are defined by AHCCCS as follows:

- Timeliness-the time elapsed between the date of service and the date that the encounter is received at AHCCCS;
- Correctness-A correct encounter contains a complete and accurate description of AHCCCS covered behavioral health services provided to a person. Correctness errors frequently identified include, but are not limited to, invalid procedure or revenue codes and ICD-9 diagnoses not reported to the correct level of specificity; and
- Omission of data-An encounter not submitted to AHCCCS or an encounter inappropriately deleted from AHCCCS' pending encounter file or historical files in lieu of correction of such record.

[RBHA insert language here]

8.1.6-B. Behavioral health provider responsibilities

Behavioral health providers must deliver covered services in accordance with the ADHS/DBHS Behavioral Health Covered Services Guide. Behavioral health providers must document adequate information in the clinical record and submit encounters in accordance with [Section 6.1, Submitting Claims and Encounters](#).

8.1.6-C. Encounter validation study findings

Written preliminary results of all Title XIX/XXI encounter validation studies are sent to ADHS/DBHS for review and comment. ADHS/DBHS has a maximum of 30 days to review results and provide AHCCCS with additional documentation that may affect the final calculation of error rates and sanctions. Behavioral health providers may be requested to assist

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ADHS/DBHS or the RBHA in reviewing encounter study results and/or, if appropriate, challenging any sanctions assessed.